

TENT PERMIT

Commercial

CITY OF DECATUR, ILLINOIS
INSPECTION DIVISION
424-2787

Permit Number: **2013-0611**

Zoning Abbr: O-1

Commerce Code: ADD/ALT - COMMERCIAL

Building Use: TENT

Work Class: TENT

LOCATION OF WORK:

1800 E Lake Shore Dr

APPLICANT:

ST. MARY'S HOSPITAL
1800 E LAKE SHORE DR
DECATUR IL 625213810

WORK DESCRIPTION:

tent to serve refreshments under canopy at Corpus Christi event

CONTRACTORS

Tent: Owner

CONSTRUCTION COST: \$30.00

PERMIT FEE: \$30.00

REQUIRED BY LAW ALL WORK MUST BE INSPECTED PRIOR TO BEING CONCEALED AND UPON COMPLETION OF WORK.

The undersigned is the owner _____ authorized agent _____ of the described real property.

Signature of Applicant: _____

This permit is issued solely for the purpose set forth in the application approved on 04/05/2013 and is conditional upon strict compliance with provisions of the Zoning Regulations and the Building code now in force. This construction permit is subject to revocation upon any violations of the Zoning Regulations to the Building Code.

Credit Memos Used:	\$0.00
Fee Paid:	\$30.00
Fee Due:	\$0.00
Pay Type:	Check
Receipt #:	260020
Application Date:	00/00/0000
Issue Date:	04/05/2013
Expire Date:	10/02/2013



Building Inspections Manager
(permit is not valid unless signed by the Inspections Supervisor or designee)